

# CHECKLIST FOR AMENDMENT OR MODIFICATION OF AIRWORTHINESS CERTIFICATE

## AIRCRAFT

Registration:	ES-
Manufacturer:	
Type:	
Serial Number:	

### 1. EVALUATION OF ELIGIBILITY OF THE APPLICANT [21.B.320(b)1]

<input type="checkbox"/>	Natural or legal person whose name an aircraft is registered <small>[21.A.172]</small> :	
<input type="checkbox"/>	or its representative:	
<input type="checkbox"/>	basis for representation:	

### 2. EVALUATION OF THE ELIGIBILITY OF THE APPLICATION [21.B.320(b)2]

<input type="checkbox"/>	Application for the issue of Certificate of Airworthiness (Form LT_AIR_3_J1_V1)	Date: 00.00.0000 Registration no: 4.5-6/00/0000 LOIS no: 4.5-6/00.00.00/000
<input type="checkbox"/>	State fee <small>[State Fees Act § 160(1)]</small> (sum/ paid by/ date):	

### 3. CLASSIFICATION OF AIRWORTHINESS CERIFICATE

<input type="checkbox"/>	CofA EASA Form 25	TC:
<input type="checkbox"/>	Restricted CofA EASA Form 24	RTC or SAS:

### 4. NATURE OF AMENDMENT OR MODIFICATION [21.B.320(b)4]

Reference to supporting document:

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MODIFICATION OF AIRWORTHINESS  
CERTIFICATE**

**5. INSPECTION OF AIRCRAFT** [21.B.320(b)5]

<input type="checkbox"/>	Inspection date and place:	
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**6. DETERMINATION OF NECESSARY CONDITIONS, RESTRICTIONS OR LIMITATIONS TO THE  
AIRWORTHINESS CERTIFICATE** [21.B.320(b)6]

<input type="checkbox"/>	Categories	
<input type="checkbox"/>	Restrictions	

**7. EDITABLE CERTIFICATE RETURNED TO THE ESTONIAN CAA**

<input type="checkbox"/>	Date /remarks	
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**INSPECTOR:**

Stamp	Signature	Date